ADJUGALL CHARD DOADD OF HEAT WILL	
ARIZONA STATE BOARD OF HEALTH BUREAU OF VITAL STATISTICS 1. PLACE OF BIRTH STANDARD CERTIFICATE OF BIRTH Registered No.	*
STANDARD CERTIFICATE OF BIRTH	4
County State ARIZONA	-
District or Township Warran Seding or Village	- 1
City 11AMI. No. 43 Wat State of the City 11AMI. No. 43 Wat State of the City 11AMI. No. 43 Wat State of the City 11AMI. Instead of street and number	
2. Pull name of child Wada Lae higher the supplemental report, as directed	. 4
3 Sev of Child I m. t	= 2
Sex of Child To be answered ONLY in over of plural for order of bleth 2nd year 7. Date of bleth Day Year	_ _
8. Full name Willey alexander Ingle Full maiden name ara amanda ama	lon
9. Residence (Usual place of abode) MIAMI. ARIZONA (Usual place of abode) (Usual place of abode)	0
If non-resident, give place and state. If non-resident, give place and state.	_]
10. Color or race	
White 11. Ago at last birthday 37 (Years) White 17. Ago at last birthday 27 (Years)	9)
12. Birthplace (city or place)	
(State or country) This (State or country)	
13. Occupation Millman 19. Occupation	
Nature of industry Cappel nume Nature of industry	
20. Number of children of this mother. (a) Born silve and now living (21. Were precautions taken against op that of this mother (b) Born silve but now dead (c) Stillborn. (c) Stillborn.	- -
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE 30	=
I hereby certify that I attended the birth of this child, who was (Born slive of atillogen).	ا .ه
* When there was no attending physician Signature. Signature.	- [
etc., should mike this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth. F. F. Miller, M. D. (Physician or midwile).	-
Giren name added from MIAMI, ARIZON Address MIAMI, ARIZON	🌉
595-516 Registrer Registrer Registrer	- 3
The state of the s	

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UKN must be made for each, and the number of each in fated.